SERFF Tracking Number: SFCM-127791887 State: Arkansas State Farm Mutual Automobile Insurance Filing Company: State Tracking Number: 50184

Company

Company Tracking Number: E828.1

TOI: Sub-TOI: MS06 Medicare Supplement - Other MS06.000 Medicare Supplement - Other

Product Name: Medicare Supplement Direct Mail Letter

Project Name/Number: Medicare Supplement Direct Mail Letter /E828.1

Filing at a Glance

Company: State Farm Mutual Automobile Insurance Company

Product Name: Medicare Supplement Direct SERFF Tr Num: SFCM-127791887 State: Arkansas

Mail Letter

TOI: MS06 Medicare Supplement - Other SERFF Status: Closed-Filed-State Tr Num: 50184

Closed

Sub-TOI: MS06.000 Medicare Supplement -

Other

Filing Type: Advertisement Reviewer(s): Stephanie Fowler

Co Tr Num: E828.1

Authors: Tammie Mills, Gerald

Younge, Sherry Boitnott

Date Submitted: 11/03/2011 Disposition Status: Filed-Closed

Date Approved in Domicile:

Implementation Date Requested: Implementation Date:

State Filing Description:

General Information

Project Name: Medicare Supplement Direct Mail Letter Status of Filing in Domicile: Pending

Project Number: E828.1

Domicile Status Comments: These Medicare Requested Filing Mode: Review & Approval

> Supplement Direct Mail Letters have been filed in our domicile state of Illinois and are pending

State Status: Filed-Closed

Disposition Date: 11/21/2011

approval.

Explanation for Combination/Other: Market Type: Individual Submission Type: New Submission Individual Market Type:

Overall Rate Impact: Filing Status Changed: 11/21/2011

State Status Changed: 11/21/2011

Deemer Date: Created By: Gerald Younge

Submitted By: Gerald Younge Corresponding Filing Tracking Number:

Filing Description:

Re: State Farm Mutual Automobile Insurance Company

NAIC #176-25178 FEIN # 37-0533100

Medicare Supplement for Arkansas

 SERFF Tracking Number:
 SFCM-127791887
 State:
 Arkansas

 Filing Company:
 State Farm Mutual Automobile Insurance
 State Tracking Number:
 50184

Company

Company Tracking Number: E828.1

TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other

Product Name: Medicare Supplement Direct Mail Letter

Project Name/Number: Medicare Supplement Direct Mail Letter /E828.1

Company Tracking #: E828.1

Form:

E828.1 Medicare Supplement Direct Mail Letter

E829.1 Medicare Supplement Direct Mail Letter

Enclosed for filing on behalf of the State Farm Mutual Automobile Insurance Company of Bloomington, Illinois are the referenced Medicare Supplement Direct Mail Letters for Arkansas.

These letters will be used by State Farm agents to send to potential Medicare Supplement insureds.

We filed the previous version of these letters in Arkansas and we received an approval on March 1, 2002.

The format and colors of these letters are variable and may change from year to year.

The Medicare Supplement Direct Mail Letters have been filed in our domicile state of Illinois and are pending approval.

The updated letters include changes to the policy series wording, an added disclaimer and removal of the tear off section.

These Medicare Supplement letters will be used with 2010 Medicare Supplement Policies 97037 HAR, 97038 HAR, and 97039 HAR approved on December 16, 2009 under SERFF# STFH-126337913

Company and Contact

Filing Contact Information

Gerald Younge, Tech - Contracts & Compliance gerald.younge.jbnp@statefarm.com

1 State Farm Plaza 309-766-0406 [Phone] Bloomington, IL 61710-0001 309-766-8483 [FAX]

Filing Company Information

State Farm Mutual Automobile Insurance CoCode: 25178 State of Domicile: Illinois

Company

One State Farm Plaza Group Code: 176 Company Type:
Laura Walters / Marketing D-3 Group Name: State ID Number:

Bloomington, IL 61710 FEIN Number: 37-0533100

(309) 763-8104 ext. [Phone]

Company

Company Tracking Number: E828.1

TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other

Product Name: Medicare Supplement Direct Mail Letter

Project Name/Number: Medicare Supplement Direct Mail Letter /E828.1

Filing Fees

Fee Required? Yes

Fee Amount: \$100.00

Retaliatory? No

Fee Explanation: \$50.00 filing fee per form, filing 2 forms at this time = \$100.00

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

State Farm Mutual Automobile Insurance \$100.00 11/03/2011 53445484

Company

Company

Company Tracking Number: E828.1

TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other

Product Name: Medicare Supplement Direct Mail Letter

Project Name/Number: Medicare Supplement Direct Mail Letter /E828.1

Correspondence Summary

Dispositions

Status Created By Created On Date Submitted

Filed-Closed Stephanie Fowler 11/21/2011 11/21/2011

Objection Letters and Response Letters

Objection Letters Response Letters Status Responded By Date Submitted Created By Created On Date Submitted **Created On** Pending Stephanie 11/08/2011 Tammie Mills 11/18/2011 11/18/2011 11/08/2011 Fowler Industry Response

Company

Company Tracking Number: E828.1

TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other

Product Name: Medicare Supplement Direct Mail Letter

Project Name/Number: Medicare Supplement Direct Mail Letter /E828.1

Disposition

Disposition Date: 11/21/2011

Implementation Date: Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: SFCM-127791887 State: Arkansas

Filing Company: State Farm Mutual Automobile Insurance State Tracking Number: 50184

Company

Company Tracking Number: E828.1

TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other

Product Name: Medicare Supplement Direct Mail Letter

Project Name/Number: Medicare Supplement Direct Mail Letter /E828.1

Schedule	Schedule Item	Schedule Item Status	Public Access
Form (revised)	Medicare Supplement Direct Mail Letter	Filed-Closed	Yes
Form	Medicare Supplement Direct Mail Letter	Replaced	No
Form (revised)	Medicare Supplement Direct Mail Letter	Filed-Closed	Yes
Form	Medicare Supplement Direct Mail Letter	Replaced	No

 SERFF Tracking Number:
 SFCM-127791887
 State:
 Arkansas

 Filing Company:
 State Farm Mutual Automobile Insurance
 State Tracking Number:
 50184

Company

Company Tracking Number: E828.1

TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other

Product Name: Medicare Supplement Direct Mail Letter

Project Name/Number: Medicare Supplement Direct Mail Letter /E828.1

Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 11/08/2011
Submitted Date 11/08/2011
Respond By Date 12/08/2011

Dear Gerald Younge,

This will acknowledge receipt of the captioned filing.

Objection 1

- Medicare Supplement Direct Mail Letter, E828.1 (Form)
- Medicare Supplement Direct Mail Letter, E829.1 (Form)

Comment: Rule 41 Guideline 7-A(1)(8) prohibits "an advertisement which uses the word "plan" without identifying it as a Medicare Supplement Insurance policy..." Please add the word "insurance" where applicable.

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Stephanie Fowler

Company

Company Tracking Number: E828.1

TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other

Product Name: Medicare Supplement Direct Mail Letter

Project Name/Number: Medicare Supplement Direct Mail Letter /E828.1

Response Letter

Response Letter Status Submitted to State

Response Letter Date 11/18/2011 Submitted Date 11/18/2011

Dear Stephanie Fowler,

Comments:

We are responding to the objection that we received on 11/8/2011.

Response 1

Comments: We have added the word "insurance" where applicable per your request. We have made both letters Arkansas state specific and we have updated the form number.

Related Objection 1

Applies To:

- Medicare Supplement Direct Mail Letter, E828.1 (Form)
- Medicare Supplement Direct Mail Letter, E829.1 (Form)

Comment:

Rule 41 Guideline 7-A(1)(8) prohibits "an advertisement which uses the word "plan" without identifying it as a Medicare Supplement Insurance policy..." Please add the word "insurance" where applicable.

Changed Items:

No Supporting Documents changed.

Form Schedule Item Changes

Form Name	Form	Edition	Form Type	Action	Action	Readability	Attach
	Number	Date			Specific	Score	Document
					Data		
Medicare Supplement	E828AR.1	1	Advertising	Initial			E828AR.1
Direct Mail Letter							.pdf
Previous Version							
Medicare Supplement	E828.1		Advertising	Initial			E828.1.pd
Direct Mail Letter							f

SERFF Tracking Number: SFCM-127791887 State: Arkansas

Filing Company: State Farm Mutual Automobile Insurance State Tracking Number: 50184

Company

Company Tracking Number: E828.1

TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other

Product Name: Medicare Supplement Direct Mail Letter

Project Name/Number: Medicare Supplement Direct Mail Letter /E828.1

Medicare Supplement E829AR.1 Advertising Initial E829AR.1

Direct Mail Letter .pdf

Previous Version

Medicare Supplement E829.1 Advertising Initial E829.1.pd

Direct Mail Letter f

No Rate/Rule Schedule items changed.

Thank you.

Sincerely,

Gerald Younge, Sherry Boitnott, Tammie Mills

 SERFF Tracking Number:
 SFCM-127791887
 State:
 Arkansas

 Filing Company:
 State Farm Mutual Automobile Insurance
 State Tracking Number:
 50184

Company

Company Tracking Number: E828.1

TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other

Product Name: Medicare Supplement Direct Mail Letter

Project Name/Number: Medicare Supplement Direct Mail Letter /E828.1

Form Schedule

Lead Form Number:

Schedule	Form	Form Type Form Name	Action	Action Specific	Readability	Attachment
Item	Number			Data		
Status						
Filed-	E828AR.1	Advertising Medicare	Initial			E828AR.1.pdf
Closed		Supplement Direct				
11/21/2011		Mail Letter				
Filed-	E829AR.1	Advertising Medicare	Initial			E829AR.1.pdf
Closed		Supplement Direct				
11/21/2011		Mail Letter				

Agent A. Agent

Sample A. Sample

Address line one

Address line two

Address line one Address line two Address line three 309 766 6411 Fax 309 763 8587



State Farm Mutual Automobile Insurance Company (State Farm®) Bloomington, IL

The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance In Had In I do Had I all a land a agent/producer or insurance company.

Dear Person1 and Person2:

Health insurance is a critical part of your financial picture. When you turn 65, Medicare will become a part of this picture.

Although Medicare offers great benefits, it contains gaps in coverage. One way you can help protect your financial reserves from being spent on these medical bills is with a State Farm Mutual Automobile Insurance Company (State Farm[®]) Medicare Supplement Insurance policy.

As a State Farm agent/producer, I can give you the details on coverage, costs, restrictions and renewability. Call me at (000) 123-6789 or stop by my office. Together we can work out a Medicare Supplement Insurance plan that is right for you.

Sincerely,

Agent photo here if used

Agent A. Agent

State Farm Agent agent@agentredirectaddress.com

State Farm Medicare Supplement Insurance Plans are available to qualified applicants under the age of 65 who meet applicable eligibility requirements in states where it is mandated to issue to under age 65 applicants. Not connected with or endorsed by the U.S. Government or the federal Medicare program. Policy coverages, exclusions and limitations may vary in some states. For exact terms and conditions see policy series 97037 HAR, 97038 HAR, 97039 HAR.

Agent A. Agent

Address line one Address line two Address line three 309 766 6411 Fax 309 763 8587



Sample A. Sample
Address line one
Address line two

State Farm Mutual Automobile Insurance Company (State Farm®) Bloomington, IL

The purpose of this communication is the solicitation of insurance.

Contact will be made by an insurance agent/producer or insurance company.

Dear Person1 and Person2:

You're living life, enjoying every day. Even though it may be hard to believe, you're quickly approaching the time when you'll be qualified to receive Medicare benefits.

The Medicare program provides many great benefits, but it doesn't cover everything. Proper planning can help you close the gaps in Medicare coverage and protect your assets.

As a State Farm Mutual Automobile Insurance Company (State Farm®) agent/producer, I can give you the details on coverage, costs, restrictions and renewability. Call me at (000) 123-6789 or stop by my office. Together we can work out a Medicare Supplement Insurance plan that is right for you.

Sincerely,

Agent photo here if used Agent A. Agent

State Farm Agent agent@agentredirectaddress.com

State Farm Medicare Supplement Insurance Plans are available to qualified applicants under the age of 65 who meet applicable eligibility requirements in states where it is mandated to issue to under age 65 applicants. Not connected with or endorsed by the U.S. Government or the federal Medicare program. Policy coverages, exclusions and limitations may vary in some states. For exact terms and conditions see policy series 97037 HAR, 97038 HAR, 97039 HAR.